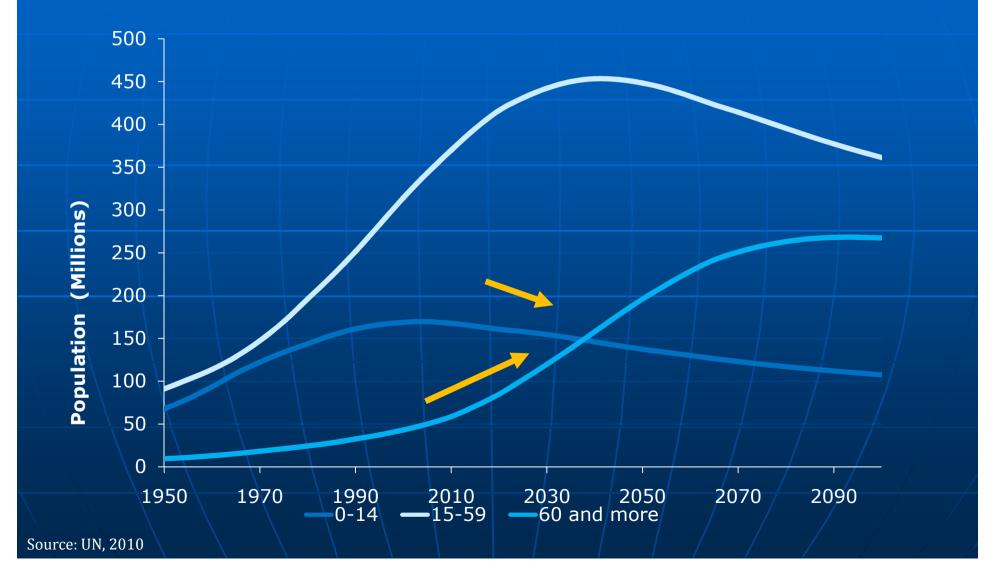
# Health Among the Elderly in LAC

#### Fernando Lavadenz

Senior Health Specialist The World Bank

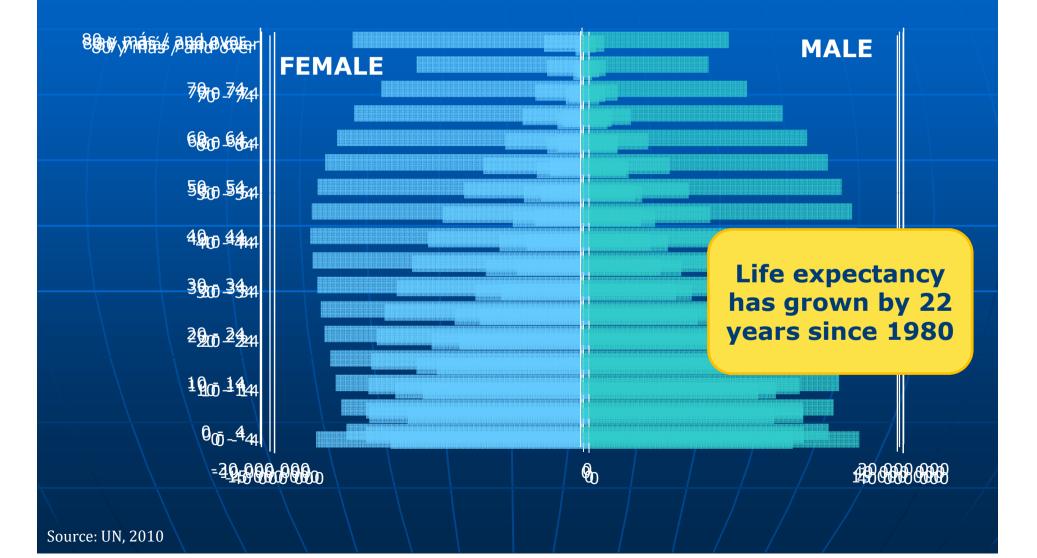
# Health and epidemiological transition in LAC are close to be completed

#### **Population Tendencies in Latin America**

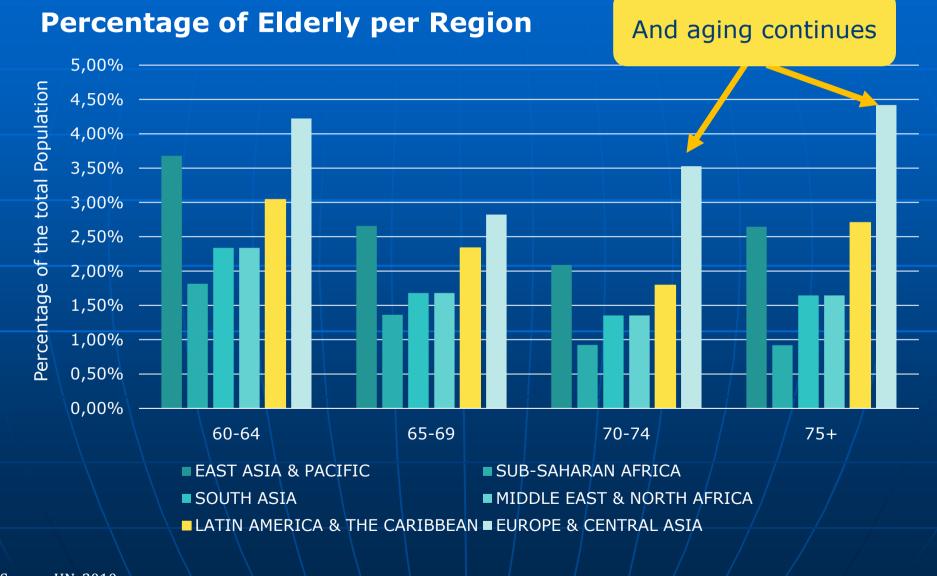


#### ...and LAC is getting older

#### Latin America Population in 2980

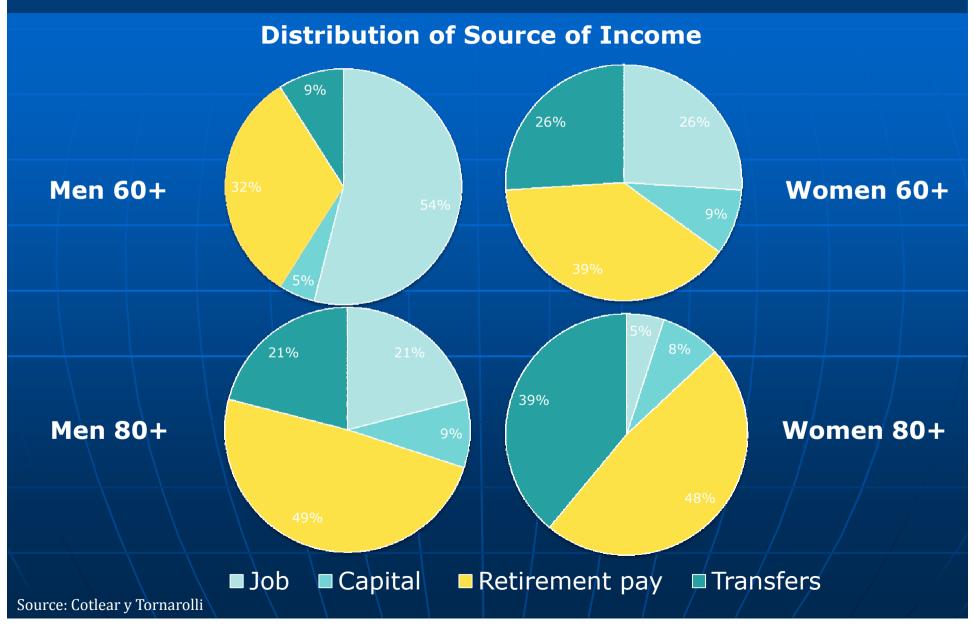


#### As well as the rest of the world



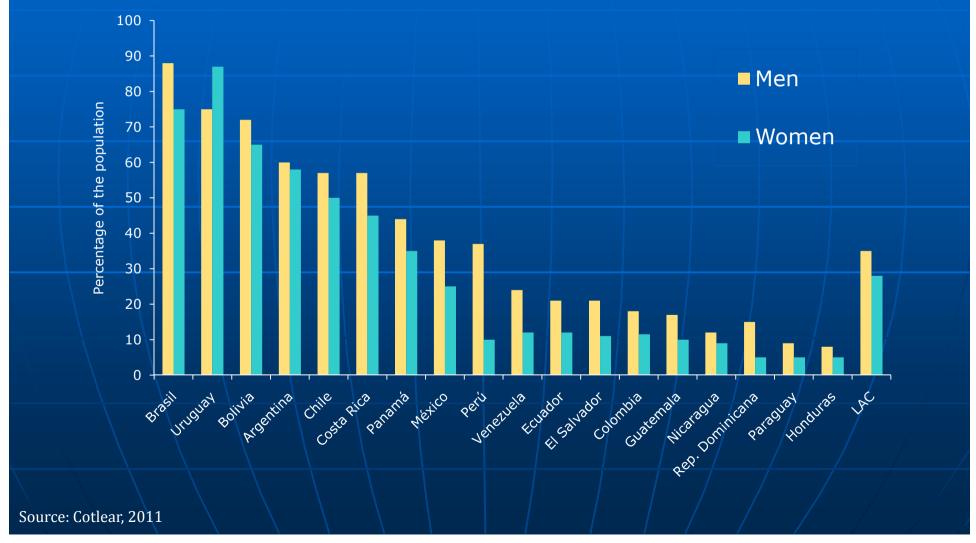
Source: UN, 2010

## However, income decreases as people get older



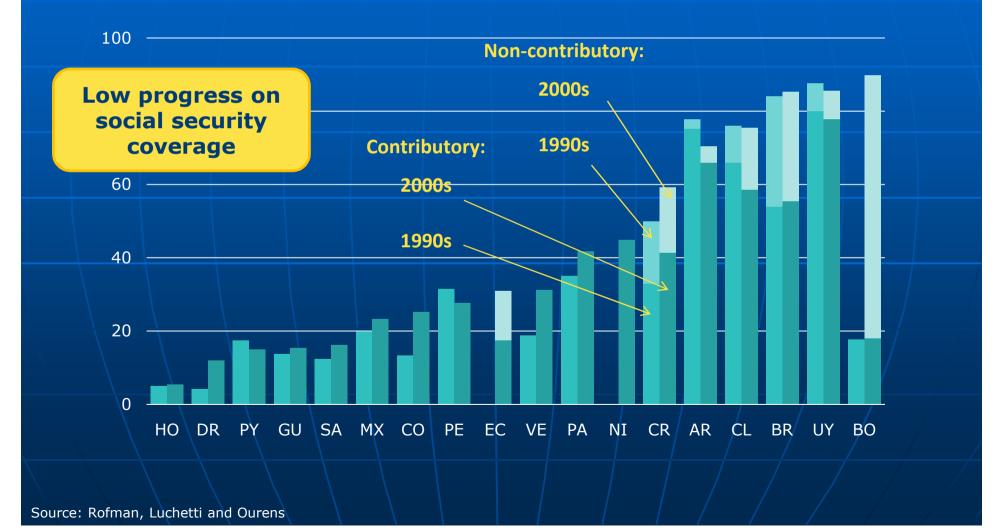
# ...and there are substantial differences in retirement payments to elderly by country

**Elderly (+60) Receiving Retirenment Payment** 



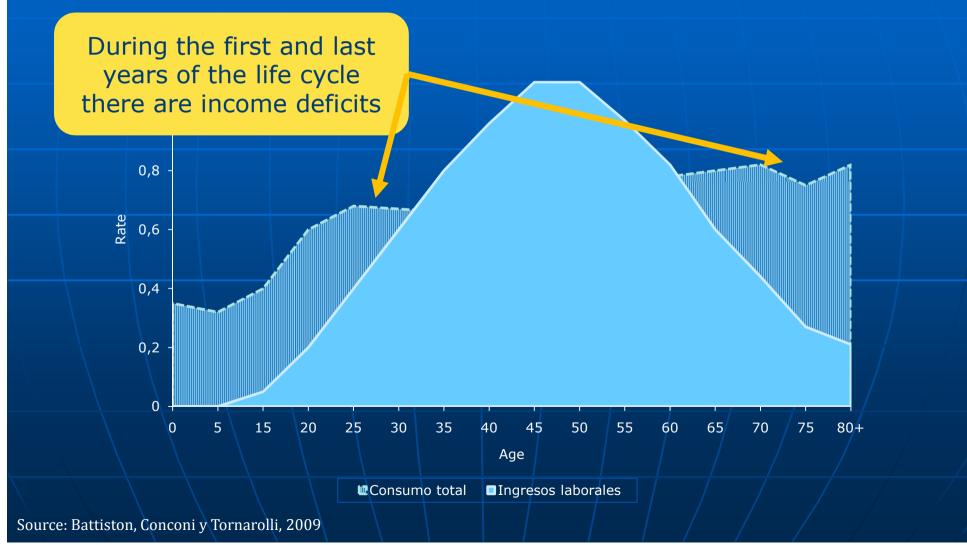
### ..as well as social security: Less than half of the elderly in LAC are covered

**Coverage of Social Security (+60) by country** 



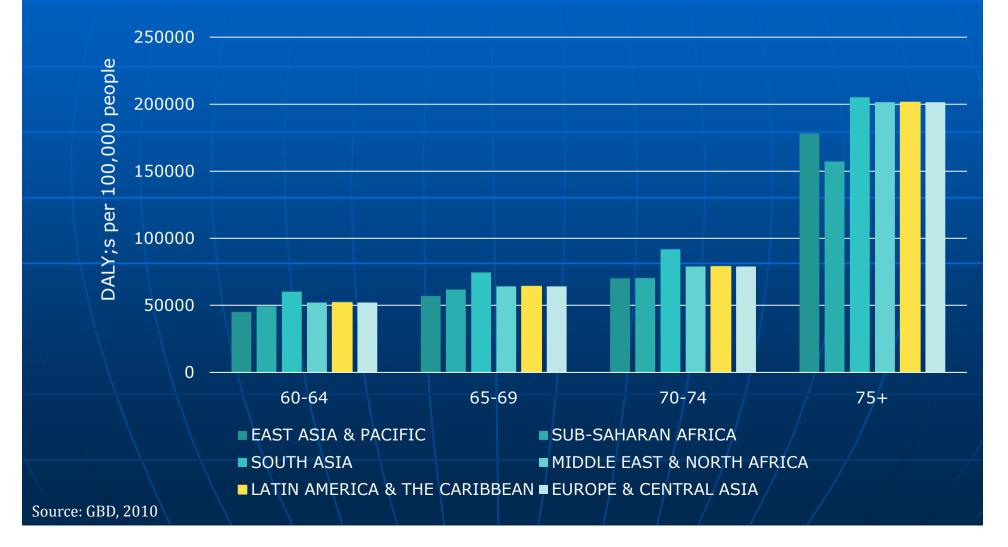
# and significant expenditures on education and health care

#### The Economic Life Cycle in LAC



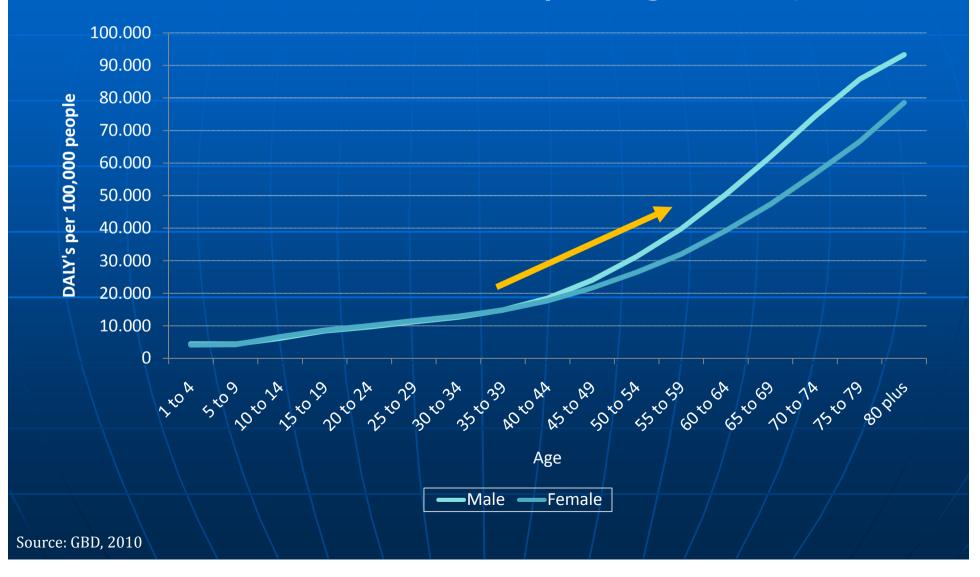
# More years of life, increases the burden of disease in the world

#### DALY's per 100,000 of Non-Communicable Diseases by region



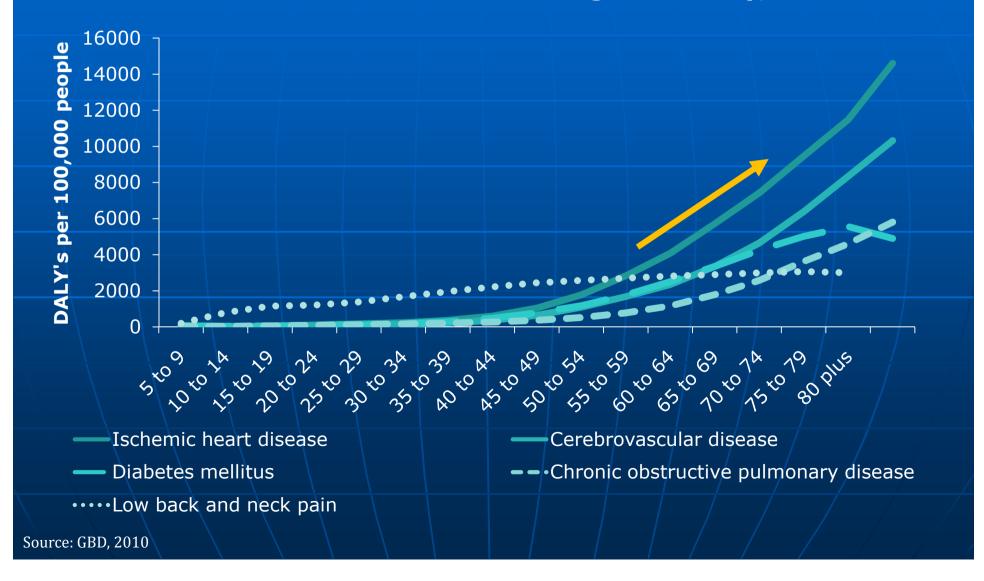
### ...as well as in LAC

#### Burden of non-communicable pathologies in LAC, 2010

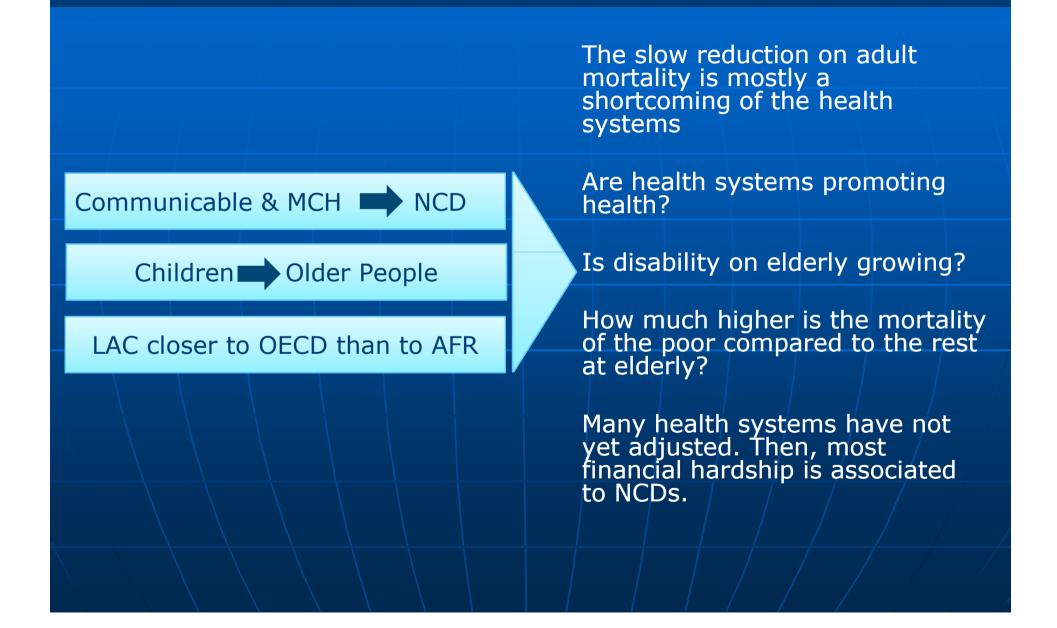


### NCD's: the fuel of the burden

#### The five Most Relevant NCD's among the Elderly, 2010



### LAC's Health system's challenges



# More money is needed: Projected Expenditure in Public Spending by 2050

#### Public social expenditures in 10 LAC countries (% of GDP) - 2050

|        | Item          | 2010 | Frozen policy | OECD policy |  |
|--------|---------------|------|---------------|-------------|--|
|        | Total         | 13.2 | 18.1          | 19.6        |  |
|        | Education     | 4.7  | 2.8           | 4.4         |  |
|        | Health        | 4.1  | 5.6           | 8.4         |  |
|        | Pensions      | 4.4  | 9.7           | 6.8         |  |
|        |               |      |               |             |  |
|        |               |      |               |             |  |
| ource: | Cotlear, 2011 |      |               |             |  |

So

### **Conclusions:**

- We expect rapid aging but this is not a "time bomb".
- Elderly, poverty and sickness are coming all together.
- Public expenditure analysis on health, pensions and education need additional tools.
- Fiscal impact of aging will depend more on "policy" than on demographics.
- "Pensions or poverty" are not the only option More social protection?.
- Families and culture are key, and both mutate responding to incentives.
- The main health challenge in LAC is now NCD's, including the poor.
- Risk Factors that affect NCD's are growing:
  Obesity, overweight, salt, sugar, tobacco, hypertension, sugar in blood, and lack of physical exercise.
- "Equity" needs to incorporate a generational dimension

# WHAT ARE LAC COUNTRIES DOING?

## **Initiatives for elderly in LAC creating evidence based policies (I)**

- Continue reforming pensions systems to reach greater coverage and savings. Involve international migrants. Extend age of retirement?.
- Extend the productive life of population as life expectancy grows:
  - *First do no harm* (with wrong incentives reduction of retirement age)
  - Life Long learning directed to over 50s
  - Labor policies for 50+ in formal and informal sectors
  - Promote women's labor force participation
  - More "elderly" based research (social, and behavioral research)

A new vision for learning, working and leisure: "better life" or "living well"?

# Initiatives for elderly in LAC creating evidence based policies (II)

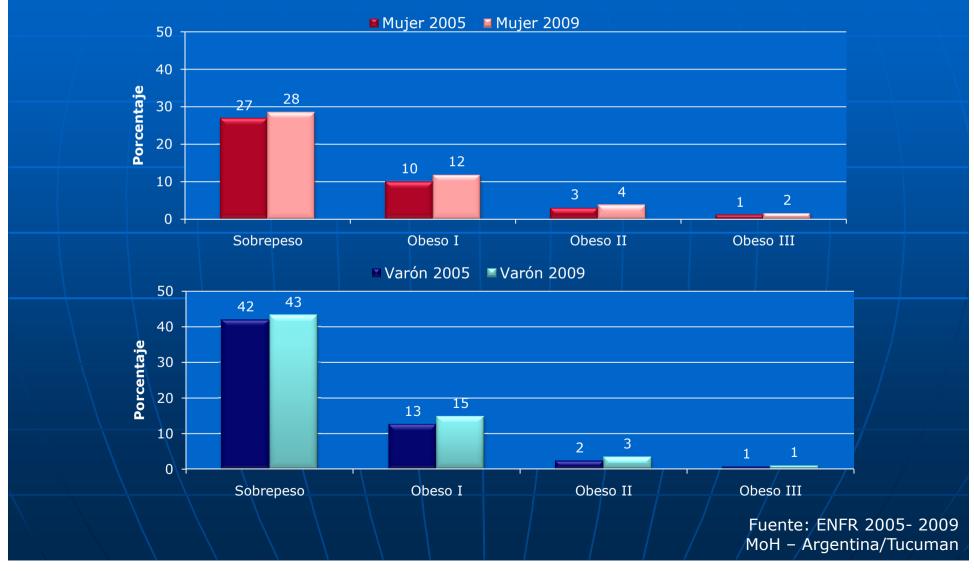
- Social pensions? (CCTs for families?). Justification greater for old-old 75's?. "Income strategy for the elderly" involves protection from ill health.
- Develop universal health policies for NCD's (including surveillance of risk factors); "milestones", proactive policy on risk factors;
- Public expenditure analysis should incorporate demographics, long term, joint consideration of human capital investments and support for the elderly. Also alarm bells for known high cost trends.
- Invest in data, analysis and research (evidence base) on population aging and public health policies.

What is the correct age for initiating prevention towards a healthy elderly?

Argentina's case: Building a new health intelligence for reducing risk Factors, and preventing NCD's

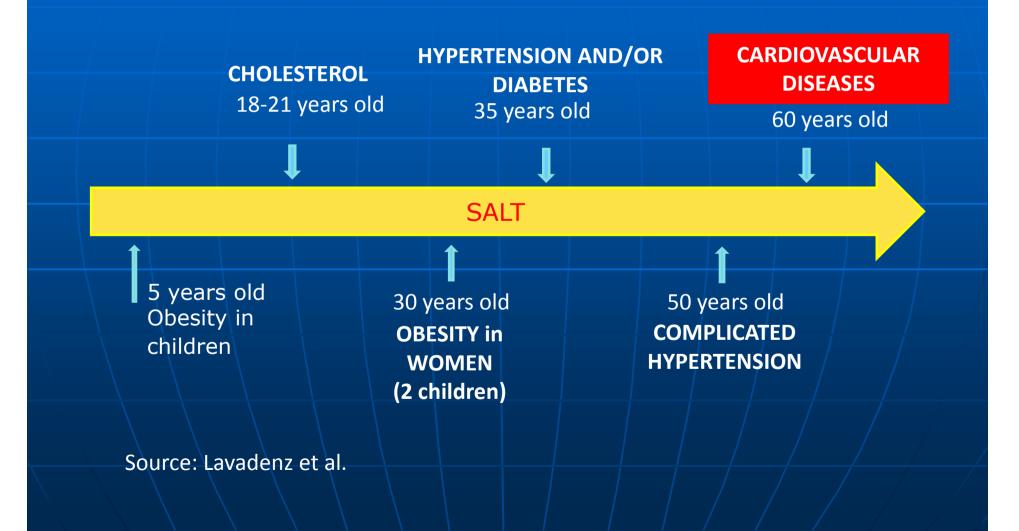
#### Risk Factor Surveys 2005 and 2009 Overweight and Obesity in Argentina

#### ARGENTINA



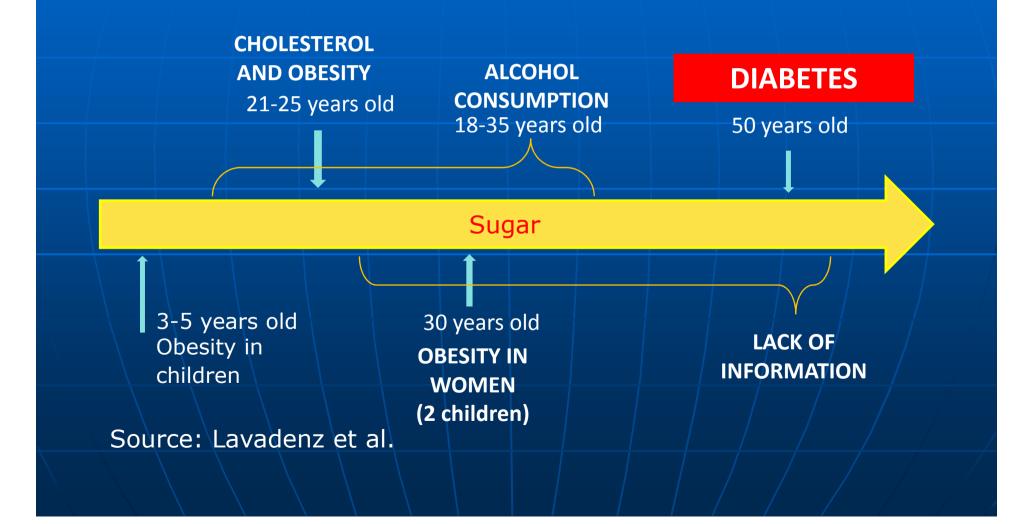
### **CVD in Argentina**

#### **Causality Chain of CVD**



#### **Diabetes in Argentina**

#### **Causality Chain of Diabetes**



### **Population-Based Intervention: the case of Argentinean bread**

#### **Causality Chain of CVD\***





\* CVD: Cardiovascular Disease

# Thank you

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